PTO/SB/05 (08-03)
Approved for use through 07/31/2006. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

426882002100 Attorney Docket No. First Inventor Alan HARRIS **EVENT DETECTION AND TRANSMISSION**

SYSTEM

(Only for new non)	Express Mail Label No. EL 990375264 US					
	APPLICATION ELEMENTS er 600 concerning utility patent application contents. MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
2.	smittal Form (e.g., PTO/SB/17) (in duplicate) original, and a duplicate for fee processing) to claims small entity status. It claims shall entity status. It claims shall entity status. It claims shall entity status. It computer Readable Form (CRF) It computer Readable For					
	19. CORRESPONDENCE ADDRESS					
X Custome	er Number: 20872 OR Correspondence address below					
Name						
Address						
City	State Zip Code					
Country	Telephone Fax					
Name (Print/	Type) Robert E Schoid Registration No. (Attorney/Agent) 42,126					
Signature Date January 29, 2004						
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EL 990375264 US, in an envelope addressed to: MS Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: January 29, 2004

Signature:

PTO/SB/17 (10-03)

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FEE TRANSMITTAL	ļ	Complete if Known					
FEE IRANSIMITIAL	Application Number Not Yet Assigned						
for FY 2004	Filing Date				Concurrently Herewith		
	1	First Named Inventor			ntor Alan HARRIS		
Effective 10/01/2003, Patent fees are subject to annual revision.	[Examiner Name Not Yet Assi			Not Yet Assigned		
Applicant claims small entity status. See 37 CFR 1.27	Art Unit N/A			N/A			
TOTAL AMOUNT OF PAYMENT (\$) 1,404.00	Attorney Docket No. 426882002100				o. 426882002100		
METHOD OF PAYMENT (check all that apply)		•		FEE	CALCULATION (continued)		
Check Credit Money Other None X Deposit Account:		DDITIO		FEES Entity			
Deposit Account 03-1952 Number	Fee Code	Fee (\$)	Fee Code	Fee (\$)	- Fee Description Fee Paid		
Deposit Account Morrison & Foerster LLP	1051	130	2051	65	Surcharge – late filing fee or oath		
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge – late provisional filing fee or cover sheet.		
X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English specification		
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812	2,520	For filing a request for ex parte reexamination		
Charge fee(s) indicated below, except for the filling fee	1804	920°	1804	920*	Requesting publication of SIR prior to Examiner action		
to the above-identified deposit account.	1805	1,840*	1805	1,840*			
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month		
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month		
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month		
Fee Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month		
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255	1,005	Extension for reply within fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal		
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal		
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing		
1005 160 2005 80 Provisional filing fee	1451	1,510	1451		Petition to institute a public use proceeding		
SUBTOTAL (1) (\$) 770.00	1452 1453	110 1,330	2452 2453	55 665	Petition to revive – unavoidable		
A EVEDA OLAMA FERO FOR LITHURY AND DELOCIE	1501	1,330	2501	665	Petition to revive - unintentional		
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1502	480	2502		Utility issue fee (or reissue)		
Claims below Fee Paid				240	Design issue fee		
Total Claims 19 -20** = x = 0.00 Independent 7 2** = 4	1503 1460	640 130	2503 1460	320	Plant issue fee Petitions to the Commissioner		
Claims 7 -3 = 4 x 86.00 = 344.00				130			
Multiple Dependent 290.00 = 290.00	1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity Fee Fee Fee Fee	1806	180	1806	180	Submission of Information Disclosure Stmt		
Fee Fee Fee Code (\$) Fee Description	8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	Filing a submission after final rejection (37 CFR 1.129(a))		
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be		
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385	examined (37CFR 1.129(b)) Request for Continued Examination (RCE)		
over original patent	1802	900	1802	900	Request for expedited examination		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	of a design application Other fee (specify)						
SUBTOTAL (2) (\$) 634.00 **or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 0.00					
SUBMITTED BY (Complete (if applicable))							
Name (Print/Type) Robert E. Scheid		ration No ey/Agent)		,126	Telephone (415) 268-6369		
Signature Date January 29, 2004							
Africa / Francisco							